# The Indiana Commission to Combat Drug Abuse



# **Comprehensive Community Plan**

| LCC Name: Knox County Local Coordinating Council |
|--|
| LCC Contact: Terry Cohen                         |
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| City: Bloomington                                |
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|  |
| County Commissioners:                            |
| Address:   |
| City:  |
| Zip Code:  |
|  |

County: Knox

### **Vision Statement**

What is your Local Coordinating Council's vision statement?

The Knox County Local Coordinating Council inspires a community free of drug and alcohol abuse.

### **Mission Statement**

What is your Local Coordinating Council's mission statement?

The mission of this LCC is to measurably assess Knox County's need and existing resources, find the gaps in our current system(s) and develop strategies and plans to fill those gaps.

| Membership List |                       |                           |       |        |                  |
|-----------------|-----------------------|---------------------------|-------|--------|------------------|
| #               | Name                  | Organization              | Race  | Gender | Category         |
| 1               | Jason Kolb            | Courage                   | White | Male   | Treatment        |
| 2               | Bill Gadberry         | Indiana State<br>Police   | White | Male   | Criminal Justice |
| 3               | James Rees            | Knox County<br>Probation  | White | Male   | Criminal Justice |
| 4               | Mollie Ewing          | CFS                       | White | Female | Prevention       |
| 5               | John Fuller           | Sheriff<br>Department     | White | Male   | Justice          |
| 6               | Jennifer Andrews      | VU Counseling<br>Center   | White | Female | Prevention       |
| 7               | Tania Willis          | LAM                       | White | Female | Treatment        |
| 8               | Kathy Evans           | VU Counseling<br>Center   | White | Female | Treatment        |
| 9               | Vanessa Phillips      | SOC                       | White | Female | Prevention       |
| 10              | Jessica Schaeffer     | Samaritan Center          | White | Female | Treatment        |
| 11              | Tina Hidde            | Community                 | White | Female | Prevention       |
| 12              | Warren English Malone | Hamilton Center           | Black | Male   | Treatment        |
| 13              | Chelsey Hedrick       | CFS                       | White | Female | Prevention       |
| 14              | Greg Risley           | Business Owner            | White | Male   | Treatment        |
| 15              | Tina Hidde            | GLL PLL                   | White | Female | Community        |
| 16              | Dawn Elkins           | North Knox<br>Schools     | White | Female | Prevention       |
| 17              | Adam Dougherty        | VU Police                 | White | Male   | Criminal Justice |
| 18              | Denise Swink          | CASA                      | White | Female | Jujstice         |
| 19              | Terry Johnson         | Vincennes Police<br>Dept. | White | Male   | Criminal Justice |
| 20              | Bryan Bible           | Vincennes Police<br>Dept. | White | Male   | Criminal Justice |
| 21              | Marsha Bishop         | LAM                       | White | Female | Treatment        |
| 22              | Judge Johanningsmeier | Knox Courts               | White | Male   | Justice          |

| 23 | Pam Hazel       | KCYF           | White | Female | Prevention |
|----|-----------------|----------------|-------|--------|------------|
| 24 | Terry Cohen     | LCC            | White | Male   | Prevention |
| 25 | Dirk Carnahan   | Knox County    | White | Male   | Justice    |
|    |                 | Prosecutor     |       |        |            |
| 26 | Joe Williams    | Drug Court     | White | Male   | Justice    |
| 27 | Matt Toothman   | South Knox     | White | Male   | Prevention |
|    |                 | Schools        |       |        |            |
| 28 | Krystle Russell | Tobacco        | White | Female | Prevention |
|    |                 | Prevention and |       |        |            |
|    |                 | Cessation      |       |        |            |
| 29 | Cathy Bush      | Hope's Voice   | White | Female | Prevention |
| 30 |                 |                |       |        |            |

LCC Meeting Schedule:

Please provide the months the LCC meets throughout the year:
The LCC meets at 12:00 noon the first Wednesday of every month.

## **Community Needs Assessment: Results**

The first step in developing an effective substance use and misuse reduction plan is to assess your community. A community assessment tells you about your community's readiness to implement prevention, treatment, and justice-related programs to address substance use and misuse. An assessment also provides an overview of the risk and protective factors present in the community, helping your coalition plan more effectively.

### **Community Profile**

Life After Meth

|   | County Name:   |
|---|--|
|   | Knox   |
|   |  |
|   | County Population:   |
|   | 36,779   |
|   |  |
|   | Schools in the community:  |
|   | Vincennes Community Schools  |
|   | North and South Knox School Corporations   |
|   | Vincennes Rivet Catholic School Corporation  |
|   |  |
|   | Medical care providers in the community (hospitals, health care centers, medical centers/clinics, etc.): |
|   | Good Samaritan Hospital  |
|   | VA Clinic  |
|   | Family Community Health  |
|   | Vincennes University Clinic Hamilton Center  |
|   |  |
|   | Mental health care providers in the community (hospitals with psychiatric/behavioral health units,       |
|   | mental health clinics, private/public providers, etc.):  |
|   | Samaritan Center   |
|   | Hamilton Center  |
|   | Raintree LLC   |
|   | Vincennes University   |
|   | Hopes Voice  |
|   | Southwest Indiana Regional Youth Village   |
|   |  |
|   | Service agencies/organizations:  |
|   | Hoosier Uplands  |
|   | CASA LAM   |
|   | United Way   |
|   | Children and Family Services   |
| L |  |
|   | Local media outlets that reach the community:  |
|   | Vincennes Sun Commercial - news paper WBVB radio   |
|   | WBV TV   |
| ļ |  |
|   | What are the substances that are most problematic in your community?:                                    |
| 1 | Meth onioids alcohol marijuana tohacco/yaning  |

List all substance use/misuse services/activities/programs presently taking place in the community:

Celebrate Recovery Courage House Road to Recovery Addictions Solutions Another Chance Christ Ministries AA, NA

#### **Community Risk and Protective Factors**

Use the list of risk and protective factors to identify those present in your community. Identify the resources/assets and limitations/gaps that exist in your community related to each. The lists are not all-inclusive and others may apply.

<u>Risk Factors Examples:</u> trauma and toxic stressors; poverty violence; neighborhood characteristics; low neighborhood attachment; community disorganization; community norms and laws favorable toward drug use, firearms, and crime; availability of alcohol and other drugs; weak family relationships; family substance use; peer substance use; mental health problems; families moving frequently from home to home; limited prevention and recovery resources.

<u>Protective Factors Examples:</u> strong family relationships; neighborhood economic viability; low childhood stress; access to health care; access to mental health care; community-based interventions; restricted access to alcohol and other drugs including restrictive laws and excise taxes; safe, supportive, and connected neighborhoods; meaningful youth engagement opportunities; local policies and practices that support healthy norms and child-youth programs; positive connection to adults.<sup>1</sup>

| Risk Factors  | Resources/Assets   | Limitations/Gaps   |
|---|--|--|
| Alcohol, Tobacco and     Other Drugs (ATOD) are     readily available for youth | Law enforcement agencies     and Excise compliance     checks with retail outlets                        | Elderly population     overlooked as an at risk     group.                         |
| consumption   | Prevention and education campaigns and events provided by schools and the                                | 2. General acceoptance of youth using tobacco/vaping, alcohol and marijuana.       |
|   | community.  3. Drug take back events that increase awareness of drug availability.                       | 3. Limited laws and local ordinances addressing availability of ATOD.              |
| 2. Untreated mental health issues co-related with substance abuse.              | Samaritan Center and mental health support services.   | Limited treatment options addressing substance abuse.     Crisis Intervention Team |
|   | <ul><li>2. Social workers located within school corporations.</li><li>3. Insurance navigators.</li></ul> | does not exist.  3. Stigma related to substance abuse                              |
| 3. Intergenerational substance abuse.   | PACE and START programming   | Poverty considered a contributing factor.  |

<sup>&</sup>lt;sup>1</sup>Risk and protective factors extracted from IUPUI Center for Health Policy Community Conditions Favorable for Substance Use, April 2018.

|                                 | <ol> <li>Low unemployment within the community</li> <li>Faith based community.</li> </ol> | of substance abuse issues.  3. Limited involvement with |
|---------------------------------|---|---|
| Protective Factors              | Resources/Assets  | treatment providers.  Limitations/Gaps                  |
| 1. Cooperation between service  | 1. Drug court.  | 1. Accurate data assimilation.                          |
| providers and justice entities. | 2. ATOD coalitions, the LCC   | 2. Funding for justice and                              |
|                                 | 3. Faith based organizations.   | treatment programs.                                     |
|                                 |   | 3. Time restraints with funding                         |
|                                 |   | and program provision                                   |
| 2. Strong community coalition   | 1. Diversity amongst coalitio   | •   |
| work.                           | participants and agencies   | with participating members.                             |
|                                 | 2. Significant participation  | 2. Uninvolved community                                 |
|                                 | within the coalition.   | entity participation.                                   |
|                                 | 3. Support of community bas   | 2 2   |
|                                 | events and activities.  | participation.  |
| 3. Community events and         | 1. Numerous free community  |   |
| activities                      | events.   | rural county.   |
|                                 | 2. Numerous civic   | 2. Participation ability with                           |
|                                 | organizations.  | activities due to poverty or                            |
|                                 | 3. Large faith based  | employment conflicts.                                   |
|                                 | community.  | 3. Limited engagement of high risk population.          |

### **Making A Community Action Plan**

Now that you have completed a community assessment and have identified the risk and protective factors that exist, you can develop a plan of action. The Comprehensive Community Plan (CCP) is a systematic and community-driven gathering, analysis, and reporting of community-level indicators for the purpose of identifying and addressing local substance use problems.

- Step 1: Create problem statements, and ensure problems statements are in line with statutory requirements
- Step 2: Ensure your problem statements are evidence-informed, then prioritize
- Step 3: Brainstorm what can be done about each
- Step 4: Prioritize your list, and develop SMART goal statements for each
- Step 5: List the steps to achieve each goal

#### **Step 1: Create + Categorize Problem Statements**

Create problem statements as they relate to each of the identified risk factors.

| Risk Factors  | Problem Statement(s)  |
|---|---|
| Alcohol, Tobacco and Other Drugs     (ATOD) are readily available for youth     consumption           | <ol> <li>There is ready access to ATOD by youth<br/>in the county.</li> <li>There is a significant lack of knowledge on<br/>the part of youth and adults relating to the</li> </ol>   |
|   | consequences of ATOD.  3. Youth Programming, as an alternative to substance use, is limited in Knox County.   |
| 2. Mental health issues, as they relate to substance abuse, affecting the quality of life for adults. | <ol> <li>There are limited resources available to address substance absue. illness.</li> <li>There are significant delays in accessing mental health services for individuals with substance abuse issues.</li> <li>Limited transportation in a rural county can impede the process of seeking treatment services.</li> </ol> |
| 3. Intergenerational substance abuse.   | <ol> <li>At risk population groups living in the county exhibit high rates of substance abuse.</li> <li>Low education rates is identified as a contributing factor to substance use and abuse.</li> </ol>   |

## **Step 2: Evidence-Informed Problem Statements**

Identify your top three problem statements using local or state data. Ensure that there is a problem statement for each co-equal funding category (e.g., prevention/education; intervention/treatment; and criminal justice services and activities).

| <b>Problem Statements</b>  | Data That Establishes  | Data Source                                   |
|--|--|---|
| Criminal Justice: There is ready access to ATOD by youth in the county.  | Problem  140 youth were arrested during 2019 for substance use charges. Out of this figure, 55 arrests were alcohol related, 18 for meth, 59 for marijuana and 13 for the use of a controlled substance.   | ISP County arrest records, 2019               |
|  | Percentage of 12th graders reporting monthly E-cigarette use in the Southwest Region of Indiana was 36.4%, during 2018. State of Indiana reported use rate was 28.6% Monthly Alcohol use by 12th graders was identified at 33% compared to the State rate of 29.5% | Indiana Youth Survey 2018 Regional report     |
|  | The Knox County Probation Department identified 77 new juvenile case for 2019 for an average number of 57 participants. Of this number 35 youth cases were substance abuse related.  | Knox County Probation<br>Department, 2019     |
| Prevention/Education: There is a significant lack of knowledge on the part of adults relating to the consequences of ATOD. | 443 adults were arrested for drug related charges during 2019. Out of this figure 127 were for alcohol related charges, 101 for meth, 145 for marijuana and 58 for a controlled substsnce.   | Indiana State Department of Health/TPCC, 2019 |
|  | Estimated smoking rate is 18% of the adult population in Knox County compared to an estimated 21.8% State rate.  18 out of a total of 115 Child Removals (CHINS) were due to Parental Alcohol Abuse, 15.7% compared to the 8.1% State rate.                        | Indiana Department of Child<br>Services, 2018 |

|   | Knox County Probation indicates that there were 365 new Adult Felony cases received in 2019. Of this number 164 were Substance Abuse related.   | Knox County Probation Department (2019)  |
|---|---|--|
|   | There were 441 new Adult Misdemeanor cases revied in 2019. Of this number 260 were Substance Abuse related.   |  |
| Treatment: There are limited resources available to address treatment needs related to substance absue. | Substance Abuse related.  Substance Abuse Treatment Episodes totals – 347 in 2018 Marijuana Use: 168 during 2018.  Marijuana Dependence: 79 during 2018.  Opiod Drug Use: 83 during 2018.  Opiod Dependence: 51 in 2018 Meth Use: 127 during 2018. Meth Dependence: 76 during 2018 Alcohol Use: 177 during 2018. Dependence: 120 during | Treatment Episode Data (TEDS): information limited to individuals entering substance abuse treatment who are at 200% below the federal poverty level and receive State funded treatment during 2018: |

## **Step 3: Brainstorm**

Consider the resources/assets and limitations/gaps that were identified for each risk factor, and list what actions can be taken for each identified problem statement.

| Problem Statements                            | What can be done (action)?                   |
|---|--|
| There is ready access to ATOD by youth in the | 1. Fund requested materials, supplies,       |
| county.                                       | equipment and training to provide            |
|   | assistance for law enforcement and justice   |
|   | related agencies in combating the use of     |
|   | illicit drugs.                               |
|   | 2. To support programs in all county schools |
|   | and educational facilities with an anti-     |
|   | tobacco, underage drinking and other         |
|   | substance abuse related prevention and       |
|   | education programs.                          |
|   | 3. To support organizations and schools in   |
|   | Knox County with programming that            |
|   | creates positive role models and positive    |

|  | drug free activities for elementary, secondary, high school and university students.  |
|--|---|
| There is a significant lack of knowledge on the part of adults relating to the consequences of ATOD. | <ol> <li>Support public awareness education and prevention programs addressing substance abuse. This would include any county agency providing awareness or education oriented programming.</li> <li>To support educational programs which address the consequences and effects of substance abuse on the individual, family and community.</li> <li>Support law enforcement/justice services as they relate to alcohol and other drug abuse issues affecting adults and families. This would include trainings, equipment and resources specific to adults and families affected by substance abuse issues.</li> </ol>   |
| There are limited resources available to address treatment needs related to substance absue.         | <ol> <li>Support the availability of substance abuse treatment and intervention services addressing substance abuse. This would include trainings, counseling services, program supplies and after care services.</li> <li>Promote increased participation with the Knox County LCC and alternative treatment/intervention providers. This would include treatment providers from the private sector, faith based organizations and recovery oriented residential treatment providers.</li> <li>Increase the availability of trainings, equipment and resources for law enforcement and justice programs specific to adults and families affected by substance abuse issues.</li> </ol> |

### **Step 4: Develop SMART Goal Statements**

For each problem statement, prioritize your list of what can be done. Choose your top two actions for each. Then, develop goal statements that demonstrate what change you hope to achieve and by when you hope to achieve it.

### **Problem Statement #1**: There is ready access to ATOD by youth in the county.

Goal 1: Probation and arrest numbers of youth with alcohol, tobacco and other drug issues (ATOD) issues will increase by 4%. during the current year.

Goal 2: Percentage of 12<sup>th</sup> graders reporting monthly E-cigarette use decrease by 5% during the current year. Monthly Alcohol use by 12<sup>th</sup> graders will decrease by 5% during the current year.

**Problem Statement #2:** There is a significant lack of knowledge on the part of adults relating to the consequences of ATOD

Goal 1: Probation and arrest numbers of for Alcohol and Drug related incidents will increase by 4%. during the current year.

Goal 2: The LCC will increase by 2 the provision of educational programs which address ATOD consequences during the current year.

**Problem Statement #3:** There are limited resources available to address treatment needs related to substance abuse.

Goal 1: The LCC will increase by 2 the provision of treatment oriented support programs addressing substance abuse issues during the current year.

Goal 2: The LCC will see a increase of 5 % individuals seeking treatment for ATOD related issues during the current year.

#### **Step 5: Plans to Achieve Goals**

For each goal, list the steps required to achieve each

| Problem Statement #1  | Steps  |
|---|--|
| Goal 1: Probation and arrest numbers of youth for ATOD issues will decrease by 4%. during the current year.   | Prevention:- Fund prevention and education programs focused on reducing youth usage of illegal substances.   |
|   | 2. Intervention – Support the provision of treatment assessments and counseling services for youth engaging in illegal substance abuse.                              |
|   | 3. Justice – Support Justice and Law Enforcement activities that identify and engage with youth participating with illegal substance use.                            |
| Goal 2: Percentage of 12 <sup>th</sup> graders reporting monthly E-cigarette use will decrease by 5% during the current year. Monthly Alcohol reported use by 12 <sup>th</sup> graders will decrease by 5% during the current year. | 1. Prevention – Support educational programming that increase youth awareness of tobacco, vaping, alcohol and other illegal drug issues.                             |
|   | 2. Treatment – Support the provision of smoking/vaping cessation and other illegal drug use with treatment programming for youth.  Justice – Support justice and law |
|   | enforcement activities that identify and   |

|  | intervene with youth using tobacco and  |  |
|--|---|--|
| Duahlam Statement #2   | vaping products and other illegal drugs   |  |
| Problem Statement #2  Goal 1: Probation and arrest numbers of for Alcohol and Drug related incidents will decrease by 4%. during the current year. | <ol> <li>Prevention – Support educational programming that increase the communities awareness of alcohol and illegal drug issues.</li> <li>Treatment – Support the provision of treatment programming for youth and adults engaged in substance abuse.</li> <li>Justice – Support justice and law enforcement activities that identify and intervene with youth and adults who abuse drugs.</li> </ol>  |  |
| Goal 2: The LCC will increase by 2 the provision of educational programs which address ATOD consequences during the current year.                  | <ol> <li>Prevention – Support educational programming that increase the communities awareness of alcohol and illegal drug issues.</li> <li>Treatment – Fund awareness activites and events that increase the communities understanding of the availability of treatment programs for substance abuse.</li> <li>Justice – Support law enforcement and justice programs that increase the communities awareness of substance abuse issues.</li> </ol> |  |
| Problem Statement #3   | Steps   |  |
| Goal 1: The LCC will increase by 2 the provision of treatment oriented support programs addressing substance abuse issues during the current year. | <ol> <li>Prevention – Support awareness activities and programming that increases the communities awareness of alcohol and illegal drug issues.</li> <li>Treatment – Support the provision of treatment programming for youth and adults engaged in substance abuse.</li> <li>Justice – Support justice and law enforcement activities that identify and intervene with youth and adults who abuse drugs.</li> </ol>                                |  |
| Goal 2: The LCC will see an increase of 5 % the number of individuals seeking treatment for ATOD related issues during the current year.           | Prevention – Support educational programming that increase the communities awareness of alcohol   |  |

| provision of treatment programming for youth and adults engaged in substance abuse.  3. Justice – Support justice and law enforcement activities that identify and intervene with youth and adults who abuse drugs. |
|---|
|---|

#### **Fund Document**

The fund document allows the LCC to provide finances available to the coalition at the beginning of the year. The fund document gauges an LCC's fiscal wellness to empower their implementation of growth within their community. The fund document also ensures LCCs meet the statutory requirement of funding programs within the three categories of (1) Prevention/Education, (2) Treatment/Intervention, and (3) Criminal Justice Services and Activities (IC 5-2-11-5).

#### **Funding Profile**

| Amount of funds deposited into the County Drug Free Community Fund from fees collected last year |
|--|
| (\$100.00):  |
|  |

\$17,398

Amount of unused funds that rolled over from the previous year (\$100.00):

Total funds available for programs and administrative costs for the upcoming year (\$100.00): \$201,491

Amount of funds granted the year prior (\$100.00):

\$17,122

How much money is received from the following entities (if no money is received, please enter \$0.00): \$0.00

Substance Abuse and Mental Health Services Administration (SAMHSA): \$0.00

Bureau of Justice Administration (BJA): \$0.00

Office of National Drug Control Policy (ONDCP): \$0.00

Indiana State Department of Health (ISDH): \$0.00

Indiana Department of Education (DOE): \$0.00

Indiana Division of Mental Health and Addiction (DMHA): \$0.00

Indiana Family and Social Services Administration (FSSA): \$0.00

Local entities: \$0.00

Other: \$0.00

# Funding allotted to prevention/education; intervention/treatment; and criminal justice services and activities (\$100.00):

| Prevention/Education: 25% | Intervention/Treatment: 25% | Justice: 25% |
|---------------------------|-----------------------------|--------------|
| \$50,372.75               | \$50,372.75                 | \$50,372.75  |

| Funding allotted to Administrative costs: |                   |  |
|---|-------------------|--|
| Itemized list of what is being funded     | Amount (\$100.00) |  |
| Coordinator Salary                        | \$6,000           |  |
| Capacity Building                         | \$4,000           |  |

| Funding allotted by Goal per Problem Statement: |                      |                      |  |  |
|---|----------------------|----------------------|--|--|
| Problem Statement #1                            | Problem Statement #2 | Problem Statement #3 |  |  |
| Goal 1: \$5,000                                 | Goal 1: \$5,000      | Goal 1: \$5,000      |  |  |
| Goal 2: \$5,000                                 | Goal 2: \$5,000      | Goal 2: \$5,000      |  |  |
|   |                      |                      |  |  |